

Section 8

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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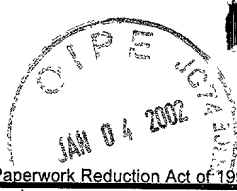
TRANSMITTAL FORM	Application Number	09/925,284
	Filing Date	August 9, 2001
	First Named Inventor	Daniel Hawiger
	Group Art Unit	1645
	Examiner Name	Unassigned
Total Number of Pages in This Submission	Attorney Docket Number	600-1-081 CON/CIP

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Executed Declaration, Power of Attorney & Statement with attached Assignment, Postcard & Check
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	Applicant Claims Small Entity Status
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm	Michael A. Yamin, Reg. No. 44,414
Individual name	
Signature	
Date	November 12, 2001

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <u>November 12, 2001</u>		
Typed or printed name	Anne M. Jones	
Signature		Date November 12, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Approved for use through 10/31/2002. OMB 0651-0032
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/925,284
Filing Date	August 9, 2001
First Named Inventor	Daniel Hawiger
Examiner Name	Unassigned
Group Art Unit	1645
Attorney Docket No.	600-1-081 CON/CIP

TOTAL AMOUNT OF PAYMENT (\$412.00)

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number: 11-1153
- Deposit Account Name:
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR 1.27
2. ☒ Payment Enclosed:
- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	370.00
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$370.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
12	-20** = 0	0	0
04	-3** = 1	42.00	42.00
Multiple Dependent		0	0

Large Entity Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$42.00)

**or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$0)

SUBMITTED BY

Name (Print/Type)	Michael A. Yamin	Registration No. (Attorney/Agent)	44,414	Telephone	(201) 487-5800
Signature	<i>Michael A. Yamin</i>	Date	November 12, 2001		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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01/09/2002 HBERIE 00000096 09925284

01 FC:201

02 FC:202

370.00 OP

42.00 UP